Submit 3 Copies to Appropriate District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P. O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.
3002504782

5. Indicate Type of Lease STATE [X] FEE [ ]

6. State Oil & Gas Lease No.
B-935

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

7. Lease Name or Unit Agreement Name
NEW MEXICO G STATE

1. Type of Well: OIL WELL [ ] GAS WELL [X] OTHER

2. Name of Operator
EXXON CORPORATION

8. Well No.
6

3. Address of Operator
ATTN: REGULATORY AFFAIRS ML#14
P. O. BOX 1600
MIDLAND, TX 79702

9. Pool name or Wildcat
EUMONT YATES 7 RVRS QN (PRO GAS)

4. Well Location
Unit Letter M : 660 Feet From The SOUTH Line and 660 Feet From The WEST Line

Section 26 Township 21S Range 36E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3557

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK [ ] PLUG AND ABANDON [ ]
TEMPORARILY ABANDON [ ] CHANGE PLANS [ ]
PULL OR ALTER CASING [ ]
OTHER: [ ]

SUBSEQUENT REPORT OF:

REMEDIAL WORK [ ] ALTERING CASING [ ]
COMMENCE DRILLING OPNS. [ ] PLUG & ABANDONMENT [ ]
CASING TEST AND CEMENT JOB [ ]
OTHER: ADD PERFS AND FRAC [X]

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

03/27/94 MIRU
03/28/94 RIH W/ CIBP AND SET @ 3590' RIH AND PERF THE SEVEN RIVERS 3392 TO 3522 W/ 3 1/8 RHSC AT 1 SPF, RIH W/ DUMP BAILER AND DUMPED 2 SX CMT ON TOP OF PLUG.
03/29/95 RU DOWELL AND SPOTTED 6 BBLS OF 15% NE FE HCL FROM 3512 TO 3382 , RU DOWELL AND FRAC THE SEVEN RIVERS ZONE, W/ 67600 # 12/20 SAND AND 28400 GALS FLUID
08/02/95 WELL IS CURRENT SHUT IN AND UNECONOMICAL TO PRODUCE

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Sharon B. Timlin TITLE Sr.Staff Office Assistant DATE 08/08/95

TYPE OR PRINT NAME Sharon B. Timlin (915) 688-6166 TELEPHONE NO.

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE AUG 14 1995

CONDITIONS OF APPROVAL, IF ANY: